

**Fax**

<b>Attention:</b> Mail Stop ISSUE FEE	<b>From:</b> Travis Dodd
<b>Fax:</b> (571) 273-2885	<b>Fax:</b> (818) 833-2065
<b>Examiner's Phone:</b>	<b>Phone:</b> (818) 833-2014
<b>Company:</b> United States Patent and Trademark Office	<b>Company:</b> Quallion LLC
<b>Re:</b> Application Serial No. 10/697,537	<b>Pages:</b> 5
Filing Date: October 29, 2003	
Confirmation No. 7571	
<b>Date:</b> April 14, 2011	
Inventor(s): SKINLO, David et al.	
Examiner: ECHELMEYER, Alix Elizabeth	
Group Art Unit: 1728	
for SEPARATOR BAG FOR USE IN ELECTROCHEMICAL CELL	
Our File No. Q178-US1	

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2003.

### CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 571-273-2885 on April 14, 2011:

- Transmittal of Payment of Issue Fee (Small Entity) (1 page)
- Fee Transmittal (1 page)
- PTOL-85 (Rev. 11/03) Part B. – Fee(s) Transmittal (1 page)
- Form PTO-2038, credit card authorization (1 page)

Lisa K. Robbins

(Name of Person Signing Certificate)

  
(Signature)

**Quallion LLC**

PO Box 823127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

NOTICE: This message is confidential, may be legally privileged, and is for the intended recipient only. Access, disclosure, copying, distribution, or reliance on any of it by anyone else is prohibited and may be a criminal offense. If it has been sent to you in error, please advise the sender of the error and immediately destroy this message.



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/697,537
		Filing Date	October 29, 2003
		First Named Inventor	SKINLO, David et al.
		Group Art Unit	1729
		Examiner Name	ECHELMEYER, Alix E.
Total Number of Pages in This Submission		Attorney Docket Number	Q178-US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized Amendment After Final Affidavit/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Issue Fee Transmittal
Remarks _____		
Customer Number or Bar Code Label <span style="border: 1px solid black; padding: 2px;">31815</span> (Insert Customer No. or Attach bar code label here)		

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 04/14/2011

Phone: (818) 833-2003  
 Fax: (818) 833-2065

By: \_\_\_\_\_

Travis Dodd  
 Attorneys for Applicant(s)  
 P.O. Box 923127  
 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____			
Typed or printed name	TRAVIS DODD		
Signature		Date	

**FEE TRANSMITTAL**

Attorney Docket No.	Q178-US1
First Named Inventor:	SKINLO, David et al.
Application Number	10/697,537
Filing Date:	October 29, 2003
Examiner Name:	ECHELMAYER, Alix Elizabeth
Group/Art Unit:	1728

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 755.00</b>
<b>METHOD OF PAYMENT (check One)</b>	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card</p>

**2. UTILITY Basic Filing Fee & Claims**


(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$330.00	\$165.00	\$0.00
Total Claims	38 - 53 =	0	X \$52.00	X \$26.00	\$0.00
Independent Claims	4 - 7 =	0	X \$220.00	X \$110.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$390.00	\$195.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$0.00
Reissue filing fee	\$330.00	\$165.00	\$0.00
Provisional filing fee	\$220.00	\$110.00	\$0.00
Total of above Calculations =			\$0.00

**3. ADDITIONAL FEES**

Fee Description	Large Entity	Small Entity	Other
Issue Fee	\$	\$755.00	\$755.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$755.00

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	04/14/2011